City of Carlsbad

12/31/1998

Building Permit

Permit No:CB984322

Building Inspection Request Line (760) 438-3101

Job Address:

3140 EL CAMINO REAL CBAD

Permit Type:

Sub Type:

Parcel No:

1670906100

Lot #:

Status:

ISSUED

Valuation:

\$1.000.00

Construction Type: NEW

Applied:

12/10/1998

Occupancy Group:

Reference #:

Entered By: Appr/Issued:

BT

CUT IN DOORBETWEEN EXISTING

Inspect Area:

12/31/1998

Project Title:

UNITS #340 AND #377

Applicant:

SCHROEDER CONSTRUCTION

2691 STATE ST

CARLSBAD CA 92008 92008

434-4396

Owner:

H S P ELCAMINO NORTH INC

	Total Fees:	\$91.18	Total Payments To Date:	\$16.00	
Descrip	tion			Fee	
BLDG PL BUILDIN STRNG M		·	· · · · · · · · · · · · · · · · · · ·	65.83 24.35	

	FINAL APPROVAL
Inspector:	TIP
Date:	2/16/99
Clearance:	

NOTICE: Please take NOTICE that approval of your project includes the "Imposition" of fees, dedications, reservations, or other exactions hereafter collectively referred to as "fees/exactions." You have 90 days from the date this permit was issued to protest imposition of these fees/exactions. If you protest them, you must follow the protest procedures set forth in Government Code Section 66020(a), and file the protest and any other required information with the City Manager for processing in accordance with Carlsbad Municipal Code Section 3.32.030. Failure to timely follow that procedure will bar any subsequent legal action to attack, review, set aside, void, or annul their imposition.

You are hereby FURTHER NOTIFIED that your right to protest the specified fees/exactions DOES NOT APPLY to water and sewer connection fees and capacity changes, nor planning, zoning, grading or other similar application processing or service fees in connection with this project. NOR DOES IT APPLY to any fees/exactions of which you have previously been given a NOTICE similar to this, or as to which the statute of limitations has previously otherwise expired.

Credit card

PERMIT APPLICATION



FOR OFFICE USE ONLY 4322

TERIVITI AFFEICATION		1	PLAN CHECK NO. 1000
CITY OF CARLSBAD BU	ILDING DEPARTMENT	a a a a a a a a a a a a a a a a a a a	EST. VAL
2075 Las Palmas Dr., Car		MC State States	Plan Ck. Deposit
(760) 438-1161	15544 67 52555	PLIFORIUM	Validated By
(700) 400 1101		Hosia	Date
1. PROJECT INFORMATION 3140 EL CATULO	WISA.	MARRIOTT	BRIGHTON GARDONS
Address (include Bldg/Suite #)	KCAL	Business Name (at	
Legal Description	Lot No. Subdivision Nam	me/Number	Unit No. 12/1@Hand NOOO1 (Total #OF units
Assessor's Parcel #	Existing Use	lone certour a le ner	Proposed Use
5 10 100	the state of the s		
CUT IN POOR BETUE CONTACT PERSON (if different to the second sec	SO. FT. SO. FT. FULL (Z) EXISTING, ADJAC from applicant) Address	#of Stories LEHT UNITS I	Between 340 H377 State/Zip Telephone # Fax #
3. APPLICANT Contractor SCHROEDER CANSTRUC	Agent for Contractor Owner C	Agent for Owner	LSBAD CA 92008 760 4344394
A. PROPERTY OWNER	Address	City	State/Zip Telephone #
	OHAL 10400 FERNWOOD RD.	BUTHESDA, 1	MP. 20817 (800) 638.8108
Name 5. CONTRACTOR - COMPANY NAM		City	State/Zip Telephone #
issuance, also requires the applicant [Chapter 9, commending with Section exemption. Any violation of Section 7.	for such permit to file a signed statement 7000 of Division 3 of the Business and 031.5 by any applicant for a permit subject 2691 STATE ST. Address	t that he is licensed pursu Professions Codel or that ts the applicant to a civil pur CARLISTAD City	ter, improve, demolish or repair any structure, prior to its uant to the provisions of the Contractor's License Law the is exempt therefrom, and the basis for the alleged enalty of not more than five hundred dollars [\$500]]. 2A 92008 (760) 434:4396 State/Zip Telephone #
State License # 494954	License Class 5 1	City Busin	ness License # 1304546
Designer Name	Address Address	City City	State/Zip Telephone
6. WORKERS' COMPENSATION			To any size a second to the contract of the co
of the work for which this permit is issued. I have and will maintain workers issued. My worker's compensation insurance Company (THIS SECTION NEED NOT BE COMPL CERTIFICATE OF EXEMPTION: to become subject to the Workers' Cowarning: The complete to the Workers' Cowarning: Failure to secure workers thousand dollars (\$100,000), in additional complete to the workers' Cowarning: The complete to the contractor's License Law does not a pursuant to the Contractor's License Law does not a pursuan	sued. S' compensation, as required by Section 3: surance carrier and policy number are: Property of the work methods and to the cost of compensation coverage is unlawful, and to the cost of compensation, damages as the Contractor's License Law for the following employees with wages as their sole concode: The Contractor's License Law does employees, provided that such improvement a owner-builder will have the burden of province and the contracting with licensed contracting by the contracting with licensed contracting to an owner of property who builds aw). Business and Professions Code in a building permit for the proposed wing person (firm) to provide the proposed	olicy No. 128 22 ED DOLLARS [\$100] OR L for which this permit is is shall subject an employer s provided for in Section 3 wing reason: mpensation, will do the wo not apply to an owner of this are not intended or offe wing that he did not build or ractors to construct the pr or improves thereon, and for this reason: the proposed property impled work. construction (include name	ssued, I shall not employ any person in any manner so as to criminal penalties and civil fines up to one hundred to 6706 of the Labor code, interest and attorney's fees. DATE
number / contractors license number):			some floor electronist 1 1004
I will provide some of the work, of work):	but I have contracted (hired) the following p	persons to provide the wor	rk indicated (include name / address / phone number / type
PROPERTY OWNER SIGNATURE			SIGN Sign catabaction/testal alan
	RESIDENTIAL BUILDING PERMITS ONLY upant required to submit a business plan,	acutely hazardous materia	als registration form or risk management and prevention
program under Sections 25505, 2553	3 or 25534 of the Presley-Tanner Hazardou	s Substance Account Act?	YES NO
			or air quality management district? YES 🔼 NO
	1,000 feet of the outer boundary of a scho		
	MERGENCY SERVICES AND THE AIR POLL		SS THE APPLICANT HAS MET OR IS MEETING THE CT.
	tion lending agency for the performance of	the work for which this pe	ermit is issued (Sec. 3097(i) Civil Code).
LENDER'S NAME	LENDER'S ADDI	RESS	extending from found then to re-
9. APPLICANT CERTIFICATION			
City ordinances and State laws relati	ng to building construction. I hereby auth	norize representatives of th	ation on the plans is accurate. I agree to comply with all he Citly of Carlsbad to enter upon the above mentioned THE CITY OF CARLSBAD AGAINST ALL LIABILITIES,

OSHA: An OSHA permit is required for excavations over 5'0" deep and demolition or construction of structures over 3 stories in height.

EXPIRATION: Every permit issued by the Building Official under the provisions of this Code shall expire by limitation and become null and void if the building or work authorized by such permit is not commenced within 365 days from the date of such permit or if the building or work authorized by such permit is suspended or abandoned at any time after the work is commenced for a period of 180 days (Section 106.4.4 Uniform Building Code).

APPLICANT'S SIGNATURE

12.10.98



1/5/99 14 Frame/Steel/Bolting/Welding

City of Carlsbad Inspection Request

For: 2/10/99

Permit#	CB984322		Inspector Assignment:	TP
Title:	CUT IN DOORBE	TWEEN EXISTING		
Description:	UNITS #340 AND	#377		
Туре:	ITI	Sub Type:	Phone: 619969	7288
Job Address:	3140 EL CAM	INO REAL	Filone. 019909	1200
Suite: Location:		Lot	Inspector:	<u></u>
APPLICANT:	SCHROEDER CO	NSTRUCTION	•	
Owner:	MARRIOT, BRIGH	ITON GARDENS,		
Remarks:	DOOR CUT IN INS	SPECTION		
Total Time:			Requested By: TOM	
			Entered By: CHRIST	INE
CD Desc	ription	Act Comn	nents	
19 Final	Structural	AP		-
	Inspectio	n History		
Date De	escription	Act Insp Co	omments	

EsGil Corporation

In Partnership with Government for Building Safety

DAT	ΓΕ: 12/21/98	☐ APPLICANT
JUR	RISDICTION: Carlsbad	U JURIS. PLAN REVIEWER
PLA	AN CHECK NO.: 98-4322 SET: I	O FILE
PRO	OJECT ADDRESS: 3140 El Camino Real	
PRO	OJECT NAME: Brighton Gardens Interior Remodel-Door Betw	een Suites
	The plans transmitted herewith have been corrected where necessar with the jurisdiction's building codes.	y and substantially comply
	The plans transmitted herewith will substantially comply with the juris- when minor deficiencies identified in Remarks below are resolved a department staff.	
	The plans transmitted herewith have significant deficiencies identified and should be corrected and resubmitted for a complete recheck.	d on the enclosed check lis
	The check list transmitted herewith is for your information. The plans Corporation until corrected plans are submitted for recheck.	are being held at Esgil
	The applicant's copy of the check list is enclosed for the jurisdiction to contact person.	o forward to the applicant
	The applicant's copy of the check list has been sent to:	
	Esgil Corporation staff did not advise the applicant that the plan che	ck has been completed.
	Esgil Corporation staff did advise the applicant that the plan check here applicant that the plan check here. Person contacted: Date contacted: (by: Mail Telephone Fax In Person	as been completed.
	REMARKS: Please make the note as in red on sheet A-2 on the Set I.	Owner Set I to the City
	By: Mike Puckett Enclosures: Esgil Corporation GA MB EJ PC 12/14/98	trnsmtl.dot

PLAN REVIEW CORRECTION LIST MULTI-FAMILY

PLAN CHECK NO.: 98-4322

JURISDICTION: Carlsbad

OCCUPANCY: R2.2

USE: Assisted Living

TYPE OF CONSTRUCTION: V 1hr.

ACTUAL AREA. No Change

ALLOWABLE FLOOR AREA:

STORIES: 3

HEIGHT:

SPRINKLERS?: Yes

OCCUPANT LOAD: No Change

REMARKS:

DATE PLANS RECEIVED BY JURISDICTION: 12/10/98

DATE PLANS RECEIVED BY ESGIL CORPORATION: 12/14/98

DATE INITIAL PLAN REVIEW

PLAN REVIEWER: Mike Puckett

COMPLETED: 12/21/98

FOREWORD (PLEASE READ):

This plan review is limited to the technical requirements contained in the Uniform Building Code, Uniform Plumbing Code, Uniform Mechanical Code, National Electrical Code and state laws regulating energy conservation, noise attenuation and access for the disabled. This plan review is based on regulations enforced by the Building Department. You may have other corrections based on laws and ordinance by the Planning Department, Engineering Department, Fire Department or other departments. Clearance from those departments may be required prior to the issuance of a building permit.

Present California law mandates that residential construction comply with Title 24 and the following model codes: 1994 UBC (effective 12/28/95), 1994 UPC (effective12/28/95), 1994 UMC (effective 2/23/96) and 1993 NEC (effective 12/28/95).

The above regulations apply to residential construction, regardless of the code editions adopted by ordinance.

The following items listed need clarification, modification or change. All items must be satisfied before the plans will be in conformance with the cited codes and regulations. Per Sec. 106.4.3, 1994 Uniform Building Code, the approval of the plans does not permit the violation of any state, county or city law.

To speed up the recheck process, please note on this list (or a copy) where each correction item has been addressed, i.e., plan sheet number, specification section, etc. Be sure to enclose the marked up list when you submit the revised plans.

Carlsbad 98-4322 12/21/98

VALUATION AND PLAN CHECK FEE

JURISDICTION: Carlsbad

PLAN CHECK NO.: 98-4322

PREPARED BY: Mike Puckett

DATE: 12/21/98

BUILDING ADDRESS: 3140 El Camino Real

BUILDING OCCUPANCY: R2.2

TYPE OF CONSTRUCTION: V 1hr.

BUILDING PORTION	BUILDING AREA (ft.²)	VALUATION MULTIPLIER	VALUE (\$)			
Interior Remodel	No Change	See Comments	See Comments			
						
Air Conditioning		·				
Fire Sprinklers						
TOTAL VALUE			See Comments			
☐ 199 UBC Building Permit Fee ☐ Bldg. Permit Fee by ordinance: \$						
☐ 199 UBC Plan Check Fee ☐ Plan Check Fee by ordinance: \$						
Type of Review:						
Repetitive Fee Appl	licable	ner:				
Esgil Plan Review Fee: \$ 65.36						
Comments: Esgil Fee = 3/4 hr at \$87.15/hr.= \$65.36						

PLANNING/ENGINEERING APPROVALS

PERMIT NUMBER CB 984322	DATE 12/18/98
ADDRESS 3140 El Cammo Re	eJ .
RESIDENTIAL	TENANT IMPROVEMENT
RESIDENTIAL ADDITION MINOR (<\$10,000.00)	PLAZA CAMINO REAL
	CARLSBAD COMPANY STORES
	VILLAGE FAIRE
	COMPLETE OFFICE BUILDING
OTHER	· · · · · · · · · · · · · · · · · · ·
PLANNER	DATE
ENGINEER	DATE <u> 2/16/98</u>

PLANNING DEPARTMENT BUILDING PLAN CHECK REVIEW CHECKLIST

30			Plan Check No. CB 98 9765 Address 5190 EUCAWINO 105AC
18			Planner <u>CHYLLINER</u> Phone (619) 438-1161, extension <u>4448</u>
Date 19/18/19			APN:
ate	Date _	Date	Type of Project and Use: Project Density:
1			Zoning: General Plan: Facilities Management Zone:
3			CFD (in/out) #Date of participation: Remaining net dev acres:
Plan Check #1 by .	Plan Check #2 by .	Plan Check #3 by	(For non-residential development: Type of land used created by this permit:)
<u>.</u>	<u>a</u>	ă	Legend: Item Complete Item Incomplete - Needs your action
			Environmental Review Required: YES NO TYPE
			DATE OF COMPLETION:
			Compliance with conditions of approval? If not, state conditions which require action. Conditions of Approval:
			Discretionary Action Required: YES NO TYPE
			APPROVAL/RESO. NO DATE
			PROJECT NO
			OTHER RELATED CASES:
			Compliance with conditions or approval? If not, state conditions which require action. Conditions of Approval:
			Coastal Zone Assessment/Compliance
•			Project site located in Coastal Zone? YES NO
			CA Coastal Commission Authority? YES NO If California Coastal Commission Authority: Contact them at - 3111 Camino Del Rio North, Suite 200, San Diego CA 92108-1725; (619) 521-8036
			Determine status (Coastal Permit Required or Exempt):
			Coastal Permit Determination Form already completed? YES NO If NO, complete Coastal Permit Determination Form now.
			Coastal Permit Determination Log #:
			Follow-Up Actions:
			1) Stamp Building Plans as "Exempt" or "Coastal Permit Required" (at minimum
			Floor Plane!

2) Complete Coastal Permit Determination Log as needed.

Inclusionary Housing Fee (Effective date of Inclusionary Housin	required: YES NO org Ordinance - May 21, 1993.)	
Data Entry Completed? Y (Enter CB #; UACT; NEXT12; Constr	YES NO uct housing Y/N; Enter Fee Amount (S	ee fee schedule for amount); Return)
Site Plan:		
property lines, easen	nents, existing and prope	to scale. Show: North arrow, osed structures, streets, existing mensional setbacks and existing
2. Provide legal descripti	on of property and assess	sor's parcel number.
Zoning:		
1. Setbacks:		
Front:	Required	Shown
Interior Side:	Required	Shown
Street Side:	Required	
Rear:	Required	Shown
2. Accessory structure s	ethacker	
		Chausa
Front: Interior Side:	Required	Shown
Street Side:	Required	Shown Shown
Rear:	Required	Shown
Structure separation:		Shown
otractare coparation.	Moquilou	
3. Lot Coverage:	Required	Shown
4. Height:	Required	Shown
5. Parking: Space	s Required	Shown
		Shown
Additional Comments		
	·	
		<u> </u>

City of Carlsbad Fire Department

98387

Bureau of Prevention

Plan Reviev	N: Require	ments Ca	ategory:	Building	Plan Chec	k 0	Curd
Date of Report	: Thursday, Dec	cember 31, 1	998		Reviewed	by:	
Contact N	ame	Schroede	r Const.	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
A	ddress	7957 Repres	sa Circle			· · · · · · · · · · · · · · · · · · ·	
C	ity, State	Carlsbad CA	N 92009	· · · · · · · · · · · · · · · · · · ·	<u>.</u>		
Bldg. Dept. No	. CB984322	<u> </u>	Pla	nning No.			
Job Name	Marriott Brighton	G	· · · · · · · · · · · · · · · · · · ·	<u> </u>	·		
Job Address _3	140 El Camino F	Real	· · · · · · · · · · · · · · · · · · ·		Ste. o	r Bldg. No	• <u></u>
☐ Disapprov	therefor tions, m applicat to comp construct ved - Please s plans of codes a	e any char bust be revious codes. bly with install ct or install see the att r specificat	nges to thes lewed by thit Please rev tructions in to improvement ached reportions necess	e items aft s office to lew careful his report nts. t of deficie sary to indi	er this date, insure contir ly all comme can result in	including nued conformats attach suspensionse make cance with a	applicable
For Fire Depart	ment Use On	ly					
Review 1st	2nd	File#	3rd		Other A	gency ID	